



**FI(S) TMG Class
 Extension**

Applicant's licence number:

Applicant last name: _____ first name: _____ date of birth: _____

place of birth: _____ place of origin: _____ nationality: _____

post code: _____ city: _____ street: _____

phone/fax home: _____ phone/fax office: _____

e-mail: _____ signature of applicant: _____

FI(S) application for TMG Class extension

Date: _____

Recapitulation of conditions and flying experience

- a) EASA SPL issued on: _____
- b) FI (S) valid until: _____
- c) EASA Medical Class 1 Class 2 valid until: _____
- d) Total flight experience as FI(S) hours: _____
- e) Minimum 30 hours total time as PIC on TMG hours: _____
- f) Pass an Assessment of Competence on TMG with an FII(S) date: _____
- f) Copy of logbook with 30 hours as PIC on TMG
- f) Original TMG AoC report on form 60.722 filled and signed by the FII(S)

FOCA internal use only:

FI(S) on TMG class date: _____

Remarks : _____ visum: _____